

BEST AVAILABLE COPY

Index of Claims		Application No.	Applicant(s)		
		10609382			
		Examiner	Art Unit		
<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Allowed		<input type="checkbox"/> (Through numeral) <input type="checkbox"/> Cancelled	<input type="checkbox"/> N Non-Elected <input type="checkbox"/> I Interference		
		<input type="checkbox"/> + Restricted	<input type="checkbox"/> A Appeal <input type="checkbox"/> O Objected		
Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	1/9/2004	51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
10		60		110	
11	(11)	61		111	
12		62		112	
13		63		113	
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15		65		115	
16		66		116	
17		67		117	
18		68		118	
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44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	